



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 2691

Bib Data Sheet

SERIAL NUMBER 09/225,245	FILING DATE 01/04/1999 RULE	CLASS 455	GROUP ART UNIT 2685	ATTORNEY DOCKET NO. 1137-761		
APPLICANTS NAOHITO TOMOE, TOKYO, JAPAN; ** CONTINUING DATA ***** <i>none</i> <i>no</i> ** FOREIGN APPLICATIONS ***** <i>yes</i> <i>no</i> JAPAN 10-218350 07/31/1998 JAPAN 10-349132 12/08/1998						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>nguyens</i> Initials	STATE OR COUNTRY JAPAN	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS 6449 ROTHWELL, FIGG, ERNST & MANBECK, P.C. 1425 K STREET, N.W. SUITE 800 WASHINGTON, DC 20005						
TITLE DEVICE FOR AND METHOD OF DETECTING INTERFERENCE WAVES						
FILING FEE RECEIVED 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/225,245	FILING DATE 01/04/99	CLASS 455	GROUP ART UNIT 2745	ATTORNEY DOCKET NO. 1137-761												
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">APPLICANT</div> <div> <p>NAOHITO TOMOE, TOKYO, JAPAN.</p> <p>**CONTINUING DOMESTIC DATA***** VERIFIED <u>none nVo</u></p> <p>**371 (NAT'L STAGE) DATA***** VERIFIED <u>none nVo</u></p> <p>**FOREIGN APPLICATIONS*****</p> <table style="width:100%; border: none;"> <tr> <td style="width:15%;">VERIFIED</td> <td style="width:20%;">JAPAN</td> <td style="width:20%;">10-218350</td> <td style="width:20%;">07/31/98</td> <td style="width:25%;"></td> </tr> <tr> <td><u>yes nVo</u></td> <td>JAPAN</td> <td>10-349132</td> <td>12/08/98</td> <td></td> </tr> </table> </div> </div>							VERIFIED	JAPAN	10-218350	07/31/98		<u>yes nVo</u>	JAPAN	10-349132	12/08/98	
VERIFIED	JAPAN	10-218350	07/31/98													
<u>yes nVo</u>	JAPAN	10-349132	12/08/98													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 2px;"> Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance </td> <td style="width:10%; padding: 2px;"> STATE OR COUNTRY JPX </td> <td style="width:10%; padding: 2px;"> SHEETS DRAWING 11 </td> <td style="width:10%; padding: 2px;"> TOTAL CLAIMS 20 </td> <td style="width:15%; padding: 2px;"> INDEPENDENT CLAIMS 3 </td> </tr> <tr> <td colspan="5" style="padding: 2px;"> Verified and Acknowledged <u>Examiner's Initials</u> _____ </td> </tr> </table>							Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3	Verified and Acknowledged <u>Examiner's Initials</u> _____				
Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3												
Verified and Acknowledged <u>Examiner's Initials</u> _____																
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">ADDRESS</div> <div> ROTHWELL FIGG ERNST & KURZ 555 13TH STREET NW WASHINGTON DC 20004 </div> </div>																
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">TITLE</div> <div> DEVICE FOR AND METHOD OF DETECTING INTERFERENCE WAVES </div> </div>																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 5px;"> FILING FEE RECEIVED \$760 </td> <td style="width:45%; padding: 5px;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: </td> <td style="width:40%; padding: 5px;"> <div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div> </td> </tr> </table>							FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>							
FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>														